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State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

STALIP

Annual Report for the year: 2017 **Limited Liability Company** 

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number <b>150520</b>	2. Exact name of the Limited Liability Company  DV II, LLC					
3. NAICS Code 531120		Brief description of the character of business conducted in Rhode Island     commercial property				
5. State of Formation RI						
6. Principal Office Address			City	State	Zip	
33 College Hill Road, Building 15			Warwick	RI	02889	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Brian Bucci			Contact Title Managing Member			
Street Address PO Box 6187			City Warwick	State RI	<sup>Zip</sup> 02887	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
			Ch	neck the box to indi-	cate an attachment	
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.						
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.						
Name of Authorized Person				Date	_	
Brian A. Bucci (0 - 2 - )						
Signature of Authorized Person						

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

